PTO/SB/21 (01-08)

Approved for use through 04/30/2008. OMB 0651-0031

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/658,135-Conf. #5402 **TRANSMITTAL** Filing Date September 8, 2003 First Named Inventor **FORM** Harold M. Aznoian Art Unit 3739 Examiner Name M I Kasztoina

(to be used for all correspondence afte	r initial filing)		IVI. J. Kasztejna							
Total Number of Pages in This Submis	sion 40	Attorney Docket Number	D0188.70209US01							
ENCLOSURES (Check all that apply)										
X Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC							
Fee Attached	Licensing-rela	ated Papers	Appeal Communication to Board of Appeals and Interferences							
Amendment/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)							
After Final	Petition to Co	1 1 1	Proprietary Information							
Affidavits/declaration(s)		rney, Revocation rrespondence Address	Status Letter							
Extension of Time Request	Terminal Disc	claimer	X Other Enclosure(s) (please Identify below):							
Express Abandonment Request	Request for	F	Form PTO-1449/A and B(modified PTO/SB/08) Copy of Foreign Patent Documents (1 foreign patent document; GB 2200072 A) Copy of European search report dated March 12, 2008 (5 pages)							
X Supplemental Information Disclosure Statement	CD, Number	of CD(s) (
Certified Copy of Priority Document(s)	Landsc	(
Reply to Missing Parts/ Incomplete Application	Remarks									
Reply to Missing Parts under 37 CFR 1.52 or 1.53										
		,								
SIGNAT	URE OF APPLICA	ANT, ATTORNEY, OR A	GENT							
WOLF, GREENFIELD & SACKS, P.C.										
Signature Some Marie .										
inted name James M. Hanifin, Jr.										
Date May 13, 2008		Reg. No.	39,213							
Certificate of Electronic Filing Under 37 CFR 1.8 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). Dated: May 13, 2008 Signature:										

PTO/SB/17 (10-07)

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Effective on 12/08/2004.				Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					10/658,135-Conf. #5402					
FEE TRANSMITTAL					September 8, 2003					
For FY 2008			First Named Inventor Harold M. Azr							
					M. J. Kasztejna					
Applicant claims small entity status. See 37 CFR 1.27			7 tit Olik		3739					
TOTAL AMOUNT OF PAYMENT (\$) 180.00 Attorney Docket No. D0188.702										
METHOD OF PAYMEN	IT (check all t	hat apply)								
Check X Credit Card Money Order None Other (please identify):										
Deposit Account Depo	osit Account Numb	per: 23	/2825	Deposit	Account Name	: Wolf, Green	nfield & Sac	ks, P.C.		
For the above-iden	tified deposit	account, the D	Director is	hereby authorize	ed to: (ched	k all that apply)				
Charge fee(s) indicated be	low		Charge	e fee(s) ind	licated below, e	xcept for th	e filing fee		
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION				······································						
1. BASIC FILING, SEARCI			ES							
	FILIN	G FEES	SEA	ARCH FEES	EXAMIN	IATION FEES	;			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)		
Utility	310	155	510	255	210	105				
Design	210	105	100	50	130	65				
Plant	210	105	310	155	160	80				
Reissue	310	155	510	255	620	310				
Provisional	210	105	0	0	0	0				
2. EXCESS CLAIM FEES								Small Entity		
Fee Description							Fee (\$)	Fee (\$)		
Each claim over 20 (include							50	25		
Each independent claim ov Multiple dependent claims		ig Reissues)					210 370	105 185		
		Inc (\$)	Eoo E	Paid (\$)	M	ultiple Depend		183		
- 20 =	X X	ee (\$) =	reer	aid (\$)			Fee Paid (\$))		
HP = highest number of total cla		reater than 20.								
Indep. Claims Extra	Claims F	ee (\$)	Fee F	Paid (\$)	-			_		
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HP = highest number of indeper	•	I for, if greater tha	an 3.							
APPLICATION SIZE FE If the specification and dr		d 100 sheets	of naner	(evoluding electr	onically fil	ed seguence or	computer			
listings under 37 CFR										
sheets or fraction there	of. See 35 U	S.C. 41(a)(1)(G) and	37 CFR 1.16(s).						
	xtra Sheets			dditional 50 or frac			Fee P	aid (\$)		
		/50 =		(round up to a who	ele number)	х	=			
4. OTHER FEE(S) Non-English Specificati	ion \$130 fe	e (no small er	ntity disco	nunt)			<u>Fees I</u>	Paid (\$)		
Other (e.g., late filing s		-	•	•	ischoure	Statement	180	0.00		
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SUBMITTED BY Signature	and La	· id	Д Т	Registration No.	39,213	Telephone	617.646.	8000		
1/4/10	6 MHC			(Attorney/Agent)	00,210					
Name (Print/Type) James M	l. Hanffin, Jr.	·	<u> </u>			Date	May 13,	∠∪∪0		
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I hereby certify that this paper	r (along with any			c Filing Under 37 (g attached or enclo		transmitted via th	ne Office elect	ronic filing		
system in accordance with §				and. A	•					
Dated: May 13, 2008	Signature	Lell	UG	manos	Delina A. A	ndriolo)				